

POSITION DESCRIPTION (Please Read Instructions on the Back)

2. Reason for Submission <input type="checkbox"/> Redescription <input checked="" type="checkbox"/> New <input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field <input type="checkbox"/> Reestablishment <input type="checkbox"/> Other Explanation (Show any positions replaced) Standard MWR NAF PD						3. Service		4. Employing Office Location		5. Duty Station		1. Agency Position No.											
7. Fair Labor Standards Act <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Nonexempt						8. Financial Statements Required <input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interest		9. Subject to IA Action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		6. OPM Certification No.													
10. Position Status <input type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR)						11. Position Is <input type="checkbox"/> Supervisory <input checked="" type="checkbox"/> Managerial <input checked="" type="checkbox"/> Neither		12. Sensitivity <input checked="" type="checkbox"/> 1--Non-Sensitive <input type="checkbox"/> 3--Critical <input type="checkbox"/> 2--Noncritical Sensitive <input type="checkbox"/> 4--Special Sensitive		13. Competitive Level Code													
15. Classified/Graded by						Official Title of Position		Pay Plan		Occupational Code		Grade		Initials		Date							
a. Office of Personnel Management																							
b. Department, Agency or Establishment																							
c. Second Level Review						Recreation Specialist Outdoor		NF		0188		03		SN		12-31-01							
d. First Level Review																							
e. Recommended by Supervisor or Initiating Office																							
16. Organizational Title of Position (if different from official title)						17. Name of Employee (if vacant, specify)																	
18. Department, Agency, or Establishment						c. Third Subdivision																	
a. First Subdivision						d. Fourth Subdivision																	
b. Second Subdivision						e. Fifth Subdivision																	
19. Employee Review-This is an accurate description of the major duties and responsibilities of my position.						Signature of Employee (optional)																	
20. Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the knowledge that						this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations.																	
a. Typed Name and Title of Immediate Supervisor						b. Typed Name and Title of Higher-Level Supervisor or Manager (optional)																	
Signature						Date						Signature						Date					
21. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards.						22. Position Classification Standards Used in Classifying/Grading Position																	
Typed Name and Title of Official Taking Action						OPM PCS Recreation Specialist, GS-0188, TS-64 June 82, TS-36 Sept 79																	
S. J. NEW																							
Principal Classifier																							
Signature						Date						Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.											
						12-31-01																	
23. Position Review		Initials		Date		Initials		Date		Initials		Date		Initials		Date							
a. Employee (optional)																							
b. Supervisor																							
c. Classifier																							
24. Remarks																							
25. Description of Major Duties and Responsibilities (See Attached)																							

NONAPPROPRIATED FUND POSITION DESCRIPTION

JOB TITLE: Recreation Specialist (Outdoor Activities)

JOB SERIES: 0188 PAY LEVEL: NF-3

Summary of Duties:

Incumbent plans, develops, manages, and maintains a military outdoor recreation program or a portion(s) thereof for a large community of active duty military, their dependents, retirees and authorized civilians. The position includes one or more of the following duties:

Plans, coordinates and schedules recurring and non-recurring activities, special events and joint community undertakings to maximize use of facilities and resources.

Identifies, coordinates, procures and schedules maintenance and repair projects. Conducts frequent inspections to ensure a safe, clean, and orderly environment.

Provides guidance and leadership to the various outdoor recreation activities and participants, modifying, adapting, expanding, or otherwise changing plans and procedures for such activities as developments require. Instructs individual participants and groups of participants in those outdoor activities for which the employee has technical expertise.

Performs other related duties as assigned.

Minimum Qualifications:

A minimum of three years experience that evidences a working knowledge of the assigned programs. A degree from an accredited college in recreation or a related field may be substituted for two years of experience. National and state background checks are required for positions that involve working with youths.